



STATE OF NEW JERSEY

FINAL ADMINISTRATIVE ACTION  
OF THE  
CIVIL SERVICE COMMISSION

In the Matter of Rene Cicchetti,  
Assistant Chief of Administrative  
Services (C0946W), Hudson County

Examination Appeal

CSC Docket No. 2019-3526

ISSUED: August 16, 2019 (RE)

Rene Cicchetti appeals the decision of the Division of Agency Services (Agency Services) which found that, per the substitution clause for education, she did not meet the experience requirements for the open-competitive examination for Assistant Chief of Administrative Services (C0946W), Hudson County.

The subject examination was announced with specific requirements that had to be met as of the August 21, 2108 closing date. These requirements included Possession of a Bachelor's degree from an accredited college or university AND two years of administrative experience in either:

Analyzing, evaluating, and providing advice to management on such matters as work methods and procedures, communications, management information systems, organizational structure, manpower utilization, distribution of work assignments, delegation of authority, policy development, budget preparation, records management or similar areas, with the objective of improving managerial effectiveness; **OR** managing, administering, or directing an organizational unit and its work program which entailed responsibility for planning, organizing, directing, staffing, coordinating, and budgeting for the activities of the unit.

Applicants who did not meet the above educational requirement could substitute additional work on the basis of one year of experience for each year of college. Possession of a Master's degree from an accredited college or university

with a major course of study in business administration or public administration or industrial management or industrial engineering or management science or in a program related to the organization, operation, administration, and control of private or public organizations could be substituted for one year of experience.

On her application, the appellant indicated that she possessed no college credits, and therefore she was required to possess six years of qualifying experience. The appellant listed one position on her application, Administrative Secretary from September 2016 to August 2018. She attached a resume to her application with more positions. On her resume, she indicated she was a Secretarial Assistant from 2014 to 2016, an Assistant Treasurer Loan Operations with North Jersey Community Bank from 2007 to 2013 (no months given, no hours given), and a Commercial Loan Administrator/Loan Closer with BCB Community Bank from 2000 to 2007 (no months given, no hours given). Official records indicate that the appellant was provisionally appointed as an Assistant Chief of Administrative Services in October 2016, and prior to that, was an Administrative Clerk from August 2016 to October 2016, Secretarial Assistant from May 2015 to August 2016, and Keyboarding Clerk 1 from June 2014 to May 2015. None of the duties described matched the announced requirements, and the appellant was found to be lacking six years of qualifying experience.

On appeal, the appellant submits a revised resume listing her provisional position, and she provides list of duties for that position and for Secretarial Assistant and Assistant Treasurer Loan Operations.

### CONCLUSION

*N.J.A.C.* 4A:4-2.3(b) provides that applicants shall meet all requirements specified in the open competitive examination announcement by the closing date.

As an Administrative Secretary, the duties listed on the application and resume had a focus of administrative support, and was not relevant to either requirement. Her remaining experience was either secretarial or support, in finance, or in loan closing. This was clearly not qualifying experience.

On appeal, the appellant provides a different list of duties for her provisional position, but they resemble the duties that that the appellant provided for the Administrative Secretary position. As a provisional, the appellant states that she maintains files and records, monitors and brings up to date the county elevator account, processes utility vouchers, tracks purchase orders, prepares personnel documents, prepares and submits payroll and resolves payroll issues, calculates raises, keeps records updated and confidential, and collects information.

The job specification for the subject title indicates that the incumbent supervising, coordinating, directing the providing or obtaining of a variety of administrative services that are essential to and support the primary functions and objectives of an organization, jurisdiction or independent appointing authority. The job specification has an extensive description of distinguishing characteristics which clearly places it in the realm of professional experience, while the appellant's description of duties is primarily clerical in nature. At this point, it appears that the appellant's position is misclassified. Therefore, the appellant and appointing authority should complete the attached Position Classification Questionnaire (PCQ) and submit it Agency Services within 30 days of the issuance date on this decision. Even if the appellant is found to be performing the duties of an Assistant Chief of Administrative Services, she could not be admitted to the examination as she would have only two years of experience, and would fall four years short of required experience per the substitution clause for education.

An independent review of all material presented indicates that the decision of Agency Services that the appellant did not meet the announced requirements for eligibility by the closing date is amply supported by the record. The appellant provides no basis to disturb this decision. Thus, the appellant has failed to support her burden of proof in this matter.

### ORDER

Therefore, it is ordered that this appeal be denied, and the position undergo a classification review.

This is the final administrative determination in this matter. Any further review should be pursued in a judicial forum.

DECISION RENDERED BY THE  
CIVIL SERVICE COMMISSION ON  
THE 14<sup>th</sup> DAY OF AUGUST, 2019



Deirdre L. Webster Cobb  
Chairperson  
Civil Service Commission

Inquiries  
and  
Correspondence

Christopher S. Myers  
Director  
Division of Appeals and Regulatory Affairs  
Civil Service Commission  
Written Record Appeals Unit  
P. O. Box 312  
Trenton, New Jersey 08625-0312

Attachment

c: Rene Cicchetti  
Elinor Gibney  
Kelly Glenn  
Records Center

# POSITION CLASSIFICATION QUESTIONNAIRE

NEW JERSEY CIVIL SERVICE COMMISSION DIVISION OF STATE & LOCAL OPERATIONS

FOR CIVIL SERVICE COMMISSION USE

SALO  
LOG NO.

**IMPORTANT:** Full instructions for completing this form are located on the last page. It is most important that employees and supervisors read them carefully. The form must be signed by the employee, his or her supervisor, the Program Manager or Division Director and the Appointing Authority Representative.

EMPLOYEE ID #

CSS  
REQUEST NO.

**INCOMPLETE REQUESTS WILL BE RETURNED.**

1. NAME OF EMPLOYEE (IF ANY)	2. ANNUAL SALARY ( <i>Current</i> )	3. POSITION NO.	4. CODE ( <i>Range and Title</i> )
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5. OFFICIAL TITLE OF POSITION	6. WORKING TITLE ( <i>If different</i> )
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7. LOCATION OF POSITION  
*(Geographic location, Unit, Section, Division, Institution, or Department)*

7A. EMPLOYEE WORK OR HOME MAILING ADDRESS

8. WORK (DUTIES) PERFORMED - Describe in detail the work required of this position. Make descriptions so clear that persons unfamiliar with the work can understand exactly what is done. **NOTE:** If this is a vacant position or a new position request, the form must be completed by the supervisor of the position and certified for accuracy by the Appointing Authority Representative.

Percent of Time	Work (Duties) Performed	Order of Difficulty

**ITEM 8 CONTINUED**

Percent of Time	Work (Duties) Performed	Order of Difficulty

9. REGULAR SCHEDULE OF WORK HOURS					
DAY	FROM	TO	DAY	FROM	TO
Monday			Friday		
Tuesday			Saturday		
Wednesday			Sunday		
Thursday			Length of Lunch Period -----		
Total Hours Worked Per Week -----					

9b. EXPLAIN ROTATION OF SHIFTS, IF ANY



**QUESTIONNAIRE CONTINUED**

10. TYPE OF SUPERVISION RECEIVED (Check One — See definitions on page 4)

CLOSE     LIMITED     GENERAL     OTHER (Explain) \_\_\_\_\_

<p>11. Does this position supervise other employees?</p> <p><input type="checkbox"/> YES (If yes, complete Items A thru E)    <input type="checkbox"/> NO</p> <p>A. <input type="checkbox"/> Occasionally?    [or]    <input type="checkbox"/> Regularly?</p> <p>B. Responsible for the preparation of performance evaluations?    <input type="checkbox"/> YES    <input type="checkbox"/> NO</p> <p>C. Assign work?    <input type="checkbox"/> YES    <input type="checkbox"/> NO</p> <p>D. Review completed work of employees supervised?    <input type="checkbox"/> YES    <input type="checkbox"/> NO</p>	<p>E. List the names and titles of the employees supervised directly. <i>(If the employees supervised comprise one or more complete units, include the names of the units)</i></p>
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<p><b>12. CERTIFICATION OF EMPLOYEE</b></p> 	<p>I CERTIFY that I have read the instructions and the entries made above are my own and, to the best of my knowledge, are accurate and complete.</p> <p>SIGNATURE ..... DATE .....</p>
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**13. STATEMENTS OF IMMEDIATE SUPERVISOR**

A. Comments on Statements of Employee

Check here if continued on additional sheets.

B. What do you consider the most important duties of this position?

Check here if continued on additional sheets.

C. List those knowledges and abilities necessary for standard performance of the job to be done by an incumbent of this position

Check here if continued on additional sheets.

D. I  AGREE     DISAGREE with the employee's description of job duties, percentage of time, and order of difficulty.

COMMENTS:

Check here if continued on additional sheets.

<p>OFFICIAL TITLE <i>(Working title if different)</i></p>	<p>SIGNATURE</p>	<p>DATE</p>
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### 14. STATEMENTS OF PROGRAM MANAGER OR DIVISION DIRECTOR

- I  AGREE with the statements of the immediate supervisor.
- I  DISAGREE with the statements of the immediate supervisor.

COMMENTS:

Check here if continued on additional sheets.

OFFICIAL TITLE  
*(Working title if different)*

SIGNATURE

DATE

### 15A. STATE APPOINTING AUTHORITY REPRESENTATIVE SIGNATURE

 In State service, the agency representative's signature certifies the information in accordance with 4A:3-3.9(c)1. 

OFFICIAL TITLE  
*(Working title if different)*

SIGNATURE

DATE

### 15B. LOCAL APPOINTING AUTHORITY REPRESENTATIVE SIGNATURE

In Local service, the agency representative's signature certifies the information in accordance with 4A:3-3.9(d).

- I  AGREE with the statements of the immediate supervisor and program manager or division director.
- I  DISAGREE with the statements of the immediate supervisor and program manager or division director.

COMMENTS:

Check here if continued on additional sheets.

OFFICIAL TITLE  
*(Working title if different)*

SIGNATURE

DATE

